FFY2019 RESIDENTIAL SUBSTANCE ABUSE TREATMENT FOR STATE PRISONERS (RSAT)

APPLICATION CHECKLIST

APPLICANT:	
INSTRU	JCTIONS: The Application Checklist is a guide to submitting a complete application. Completed applications are to be emailed to grants@njoag.gov within 45 days of receipt.
Application Content and Form Documents to be Completed and Returned:	
	Applicant Information Form – Form Included
	Project Narrative
	 Problem Statement/Needs Assessment – Provided by Applicant
	 Goals, Objectives and Work Plan (Action Strategy) – Provided by Applicant
	 Coordination of Services – Provided by Applicant
	 Project Management Structure, Staff and Resumes — Provided by Applicant
	 Data Collection/Performance Measures/Evaluation – Provided by Applicant
	Budget Detail Worksheet – Form Included
	Application Authorization – Form Included
	Federal Single Audit Requirements and Certification – Form Included
	Proof of Compliance Federal Audit Requirements – Provided by Applicant
	Certifications Regarding Lobbying, Debarment, Suspension and Other Responsibility Matters and Drug-Free Workplace Requirements – Form Included
	Department of Law & Public Safety Debarment and Suspension Certification – Form Included
	Proof of Compliance with SAM Registration Requirements – Provided by Applicant
	Certified Standard Assurances – Form Included